

**Opening Statement, “Update on the U.S. Public Health Response
to the Ebola Outbreak”
Congressman Michael C. Burgess, MD
Subcommittee on Oversight and Investigations
November 18, 2014, 1:30 p.m.**

This Ebola epidemic will surely go down in history as one of the most serious public health crises of the last several hundred years.

At our last hearing, we had a lot to discuss. Overall, we failed in our response to the Ebola crisis. Communication was lacking, systems of protocol broke down, and provisions were never in place to deal with this crisis to begin with. We know better than to let this happen again. This summer’s emergency only emphasized that we must have humility when discussing Ebola.

As a physician, one of my biggest concerns over the last six months or so was the safety and protection of health workers. I could not – and still do not – understand why health workers on the front lines of the epidemic in Africa were so much better protected than the nurses and doctors who treated Ebola patients in the United States. It is not only vital to contain the Ebola virus

wherever it may be, but we must also ensure we are doing all we can to protect those who are serving these very sick and contagious patients. Until it is in your back yard as it was in mine in Texas, it is hard to comprehend the depth of the issue at hand.

I commend Dr. Frieden, the CDC and the other members of the panel for making yourselves available to the Congress so we may discuss policies that better protect the American public from infectious diseases like Ebola. I thank all of our witnesses for being here today.

It is my hope that we continue to make progress in this fight. Today's hearing is another good start. We must examine the response plan, protocol, U.S. guidelines, travel restriction policies, budget for dealing with this crisis and protective gear and proper precautions for health workers. But finally, we must also take great care to closely follow the epidemic in West Africa, as it is only a matter of time before another patient walks through the doors of an unsuspecting U.S. hospital.

When – not if – that happens, we must be prepared.

I yield back.